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ADDENDUM

TO

STATE PLAN FOR
REHABILITATION FACILITIES AND WORKSHOPS

MONTANA



Division of Vocational Rehabilitation
507 Power Block
Helena, Montana 59601

Date of Preparation
June 1, 1970

F O R E W O R D

In accordance with the guidelines attached to Commissioner's Letter 68-41, dated June 18, 1968, this document is being submitted as the second annual addendum to the Montana State Plan for Rehabilitation Facilities and Workshops. This Addendum is intended to be a public document which will update and maintain as functional the original Facilities Plan. The Facilities Plan and its Addendums are to serve as a directory in guiding and influencing the utilization and construction of workshops and rehabilitation facilities. Furthermore, they should be an effective tool in providing and maintaining high quality rehabilitation services and facilities for the rehabilitation of all physically and mentally disabled people.

Duane H. Cunningham
Facilities Specialist
Division of Vocational Rehabilitation

TABLE OF CONTENTS

<u>Section</u>	<u>Page</u>
Policy and Method of the Rehabilitation Facilities Program.....	1
Planning Relationships.....	1
Advisory Committee.....	2
Inventories - Narrative Evaluations.....	3
Helena Industries.....	3
Eastmont Training Center.....	3
AVCO/ESC Vocational Evaluation and Work Adjustment Center..	4
Missoula Rehabilitation Center.....	4
Missoula Halfway House.....	5
Butte Sheltered Workshop.....	6
Identification of Rehabilitation Service Deficiencies.....	7
Existing Facility Needs.....	9
Priorities.....	10

POLICY AND METHOD
OF THE
REHABILITATION FACILITIES PROGRAM

The policies and administration of the facilities program are covered under Sections 5, 16, 22, and 23 of the Montana State Plan for Vocational Rehabilitation. The Facilities Specialist, who is directly responsible to the State Director of the Division of Vocational Rehabilitation, is appointed as Project Director for the Rehabilitation Facilities and Workshops Plan. The duties of the Facilities Specialist, in regard to the Facilities Plan, have remained the same in that he is expected to set up standards, provide adequate planning programs with the help of his Advisory Committee, and assure the effective utilization of facilities. The functions also include reviewing and processing applications for grants to establish or expand facilities and workshops. The Facilities Specialist also coordinates a program to orient staff as to the types of services available through facilities and workshops.

PLANNING RELATIONSHIPS

Planning relationships previously established, first with the State-wide Planning Project for Vocational Rehabilitation Services and later maintained through the state Facilities Specialist and the facilities program, continue to be active with all social and rehabilitation-related fields. In particular, close liaison is maintained with the Model Cities programs in Butte and Helena and with Comprehensive Health Planning. Planning relationships are well established with the different Manpower Advisory and Human Resources planning groups throughout the state, in addition to the different state agencies with which we have cooperative projects or agreements.

ADVISORY COMMITTEE

The original 17 member Advisory Committee was selected by Planning Regions in an attempt to obtain a representative distribution throughout the state. After the original Plan had been written, however, the number was reduced to five members in hopes of making a more workable group. In doing this, one of the five Planning Regions, Region 5, was left without a representative.

It is the mutual feeling of the Advisory Committee and the Facilities Specialist that one more member should be added to the Committee from Region 5. This is felt to be particularly important in light of a blossoming interest in this Region for rehabilitation facilities. The new member who has been selected is:

Gerald F. Butcher, Superintendent
Eastmont Training Center
Glendive, Montana

All of these members are concerned about the development of rehabilitation facilities and workshops in Montana and particularly in the Planning Region they represent.

INVENTORIES
NARRATIVE EVALUATION

It should be pointed out that the statistical inventory forms, RSA-11, have been omitted from this Addendum due to the late starting dates of new facilities. Statistical data simply is not meaningful for Helena Industries, for example, which just opened its doors this month. There are several new rehabilitation facilities in Montana which will be beginning operations in the next month or two and RSA-11 forms will be supplied on these facilities in next year's addendum. These facilities will be described in narrative form only this year.

Helena Industries

This new multi-disability workshop held its grand opening on May 11, 1970. This facility has a well-qualified staff and is proposing a fine quality program, developed in conjunction with Helena Model Cities. This workshop is designed to be transitional in nature and is providing work evaluation and work adjustment training services. The workshop has room for expansion and as additional staff are hired and the total program develops, it is felt that this facility will meet the rehabilitative needs of the handicapped in Helena and west-central Montana.

Eastmont Training Center

This facility also just recently held its dedication ceremonies and is designed as a residential and day-care facility for the mentally retarded. Eastmont is located in Glendive, Montana and is the first of a number of facilities of this type, hopefully, to be built around the state. This type of facility is designed to accomodate the retarded in their own community

Eastmont Training Center (Continued)

areas, as well as alleviate the over-population problem of the state school for the retarded at Boulder. The Division of Vocational Rehabilitation will not be involved with this population until they have reached age 16. The Division does have a special counselor for the mentally retarded located in the area and assigned to work with the mentally retarded from Eastmont who are eligible.

AVCO/ESC Vocational Evaluation and Work Adjustment Center

This is a new facility sponsored by the Avco Economic Systems Corporation, a private company interested in the development of human resources in Montana. The facility is located in the hospital building at the former Glasgow Air Force Base, Glasgow, Montana. This center has a well-qualified staff and is offering work evaluation and psychological services. They hope to be offering work adjustment services in the near future. Once again, this center has just begun operations and there are no statistics available. However, the Division of Vocational Rehabilitation intends to utilize this facility quite extensively because the center can provide a good work evaluation in a relatively short period of time, and housing is not a problem since AVCO has the use of base housing.

Missoula Rehabilitation Center

This facility is being sponsored by the Missoula Crippled Children's Association, Inc., which has operated a physical therapy treatment center in the basement of the old Community Hospital since 1948. They have constructed a new building and moved into these quarters on the first of May.

Missoula Rehabilitation Center (Continued)

This new rehabilitation facility will be providing the following services: physical therapy, occupational therapy, speech and hearing therapy, prosthetic appliances and braces, psychiatric and psychological services, vocational, special education, child development, and home health services.

The New Community Hospital is going to be built very shortly adjacent to the rehabilitation center, and the two facilities will complement each other in being able to offer a fairly comprehensive rehabilitation unit for the disabled of western Montana.

Missoula Halfway House

The Western Montana Council on Alcoholism has been working to establish a halfway house in Missoula for a number of years. They have finally succeeded in leasing two suitable dwellings from St. Patrick's Hospital for a nominal fee and will be starting their program this month.

They have a house director hired and have made arrangements with the University of Montana for counseling and treatment staff. One of these houses is going to be the halfway house with a capacity of 10-12 male clients, while the house next door will be utilized as the Alcoholic Service Center. The program will include counseling services, assistance in obtaining employment, and other structured activities including group work and AA orientation. The Division of Vocational Rehabilitation will be purchasing services from this facility, and it is felt that these services will be valuable in assisting the alcoholic client.

Butte Sheltered Workshop

The Butte Sheltered Workshop is being mentioned in this inventory because of significant changes in their program. The shop has hired new staff consisting of a work evaluator, vocational counselor, and contract procurement person and are offering work evaluation and work adjustment training services. We are very pleased to see this workshop grow and expand as it is now providing invaluable services to the disabled people in the Butte area. The Division of Vocational Rehabilitation is well satisfied with the evaluations and reports we have been receiving from this facility and will continue to utilize the workshop as a valuable resource.

The workshop has moved to a new, larger location and is currently in the process of remodeling and expanding its new shop. This will enable the workshop to bring in more contracts and serve many more clients. With the capable staff now on board at the Butte Sheltered Workshop, I am sure it will continue to develop into an excellent facility.

IDENTIFICATION OF REHABILITATION SERVICE DEFICIENCIES

Montana has come a long way in the past year in meeting areas of rehabilitation facility needs, particularly in the area of sheltered workshops and work evaluation centers. As pointed out in the narrative inventories, most of these facilities are only beginning but have sound programs and will develop into quality rehabilitation facilities.

Other areas pointed out by the Advisory Committee as being deficient at the time of the writing of the original Facilities Plan and first year Addendum, but which have since developed include:

1. The addition of ten new counselors to the Montana State Division of Vocational Rehabilitation staff in an attempt to cut down the size of individual counselor caseload and territory, thereby increasing the effectiveness of rehabilitation services.
2. The establishment of a demonstration project for rehabilitation of the welfare recipient. This will be a concentrated effort by two rehabilitation counselors, two welfare case-workers, and four rehabilitation aides to remove larger numbers from the public assistance rolls.
3. The establishment of a project at the Montana State Prison to more effectively meet the rehabilitative needs of inmates within the prison. As with most states, correctional rehabilitation in Montana regarding both adults and juveniles is a relatively virgin area.
4. The expansion of the independent living training program with the mentally retarded at Boulder River School to include the annex house concept in preparing the retarded for self-sufficiency in society.

5. The Aftercare Division of the Department of Institutions has developed a number of group homes primarily for the use of the mentally retarded while they are in transition from the institution to society. These are essentially halfway houses as they are utilized while the client is in evaluation at a workshop or in a training situation.

Those areas still seen as unmet needs by the Advisory Committee consist of the establishment of sheltered workshops and rehabilitation centers in some of the larger communities in Montana. There is potential danger in straying from the base-satellite concept of facility development if these facilities cannot be established in the near future. There almost seems to be more interest and demand for rehabilitation facilities in some of the smaller, more isolated communities than in the larger cities. It would be difficult to establish a satellite or treatment center without a base facility to identify with or receive support from. Therefore, Billings and Great Falls will remain as priority areas in the development of workshops, rehabilitation centers, and halfway houses.

Other areas of deficiency in rehabilitation service include a rehabilitative program for the mentally ill. The Division of Vocational Rehabilitation has a counselor stationed at the State Hospital, but there is not adequate service being provided at the Hospital to prepare these patients for employment in society.

Furthermore, Montana needs to develop a system of halfway houses which would serve disability groups other than the alcoholic client. The Advisory Committee suggests development along the lines of the plan described in the original Facilities Plan; i.e., halfway houses around the state to serve

different disability groups as well as multi-disability houses in areas where there is a possibility of success.

Rehabilitation services have also not been sufficient for the Indian population of Montana, and particularly in reference to the rather severe alcoholic problems present on most reservations. It is felt that some type of program should be developed to better serve this disability group, whether it would involve specially trained counselors to work with this population or development of facilities to deal with this problem.

EXISTING FACILITY NEEDS

The Division of Vocational Rehabilitation will, of course, continue to utilize and support the new and existing facilities within the state; however, in accordance with the base-satellite concept of facilities development, will encourage the development of base facilities in the larger communities in Montana which can support them. The basic requirements include a concentration of population, concentration of business and industry, availability of agencies to provide supportive services, transportation facilities, and available housing. It is felt that Billings and Great Falls should be encouraged in the development of sheltered workshops and comprehensive rehabilitation centers. There are interested and concerned groups in both of these cities and, hopefully, facilities can be developed in the near future.

PRIORITIES

In view of the foregoing rehabilitation service deficiencies and the determination of needs of existing facilities, the areas of base workshops and rehabilitation centers shall remain top priorities of need for the state. If these facilities are not developed, there is danger of small facilities being started indiscriminately around the state with little coordination or support.

Priority should also be given to a rehabilitation program for the mentally ill at the State Hospital and the establishment of halfway houses around the state to better serve all disability groups. For instance, there should be halfway houses for the mentally ill, the mentally retarded, and the ex-convict, in addition to those already established for alcoholics. There are interested groups concerned with these areas, but seemingly not well organized. Should sufficient interest be raised, these items should also be given a top priority.

